
HCFA/CMS

ALUMNI NEWS

SPRING 2003 (Vol. 9 No. 2)

MESSAGE FROM THE PRESIDENT

Well, a winter to remind us what winters are all about has finally come to an end and spring is here and the feeling of renewal is in the air. And so I'd like to remind those few of you who may not have gotten around to renewing your membership in the HCFA Alumni Association for 2003 that a last call to do so can be found in this issue. Dues remain at \$5.00 per year and we hope you will take advantage of the opportunity to renew at this time, while it is fresh in your mind.

The association continues to be an important part of the retirement life of many of us. On page 2 you will see a list of 5 new members. Over 370 of our 397 current members have already renewed their membership. By providing copies of the CMS VOICE, a Member Directory and a quarterly newsletter, we promote a continuing connection between CMS (formerly HCFA) and its retirees, both at the central office and regional office levels. We try to provide information of interest to all retirees. Note the items inside about the COLA Count, Social Security and Pension reform proposals, the Social Security Administration Employee Activities Association (SSAEAA), a potential retiree tax break on health insurance premiums, a generic drug pricing item, a travel story from Bob Bath (one of our own always on the go members), a whimsical piece about time getting better with age, and much more. And we are always on the lookout for suggestions about things to do or events to sponsor in furtherance of our goals as a social organization.

As always you will also find information inside about senior staff changes at CMS.

I want to wish you all a wonderful spring and summer season and continued happiness, good health and prosperity in retirement.



William L Engelhardt

HCFA/CMS ALUMNI NEWS

Published four times a year for the members of the Health Care Financing Administration /Centers for Medicare and Medicaid Services (HCFA/CMS) Alumni Association

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Summer Issue – June 27, 2003

Fall Issue – September 26, 2003

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NEW MEMBERS

The Association extends a hearty "Welcome Aboard" to the following new members:

George & Annette Brauchler
Max Buffington
Carol Conciatori
Sally R. Kitchen
R Thomas Talbott

We now have 397 active members.

LAST CALL FOR MEMBERSHIP RENEWAL AND PAYMENT OF YEAR 2003 DUES

It is particularly gratifying to the Board and staff that over 370 of our current roster of 397 members have renewed for the year 2003 or later, using the re-enrollment form provided in either the Fall 2002 or Winter 2003 issue of the Alumni News. We encourage those few who have not yet done so to renew their membership now. Dues remain at just \$5.00 per year. Please note any changes in information so we may update our records (i.e. address, e-mail, phone number, fax number, etc.). We strive to provide useful information to all members in our newsletter and we know that the Member Directory is very helpful to many of you for keeping track of each other. Suggestions for improvement in this area are always welcome.

Unfortunately, this will be the last HCFA/CMS Alumni News for members who do not renew. We much regret losing any member and will remove you from the roles with great reluctance. If a non-renewing member has a business card

**LAST CALL FOR MEMBERSHIP
RENEWAL AND PAYMENT OF YEAR
2003 DUES (Continued):**

published in the Alumni News, it must also be removed. If you haven't renewed yet, we will still welcome your renewal with open arms. Membership renewal is now permitted for any number of years (because the annual dues are nominal, there is no discount for multiple years) for the convenience of our members. The time is now but it is never too late. Nearly 95 percent of the membership has renewed and the remaining members will receive a renewal form and return envelope with this issue of the Alumni News (if you don't get one you have already renewed).

NEW MEMBER DIRECTORY UPDATE

At the back of this newsletter you will find a Member Directory Update. It includes all additions (i.e., new members) and reported changes since the Summer 2002 Edition of the Member Directory was issued. We have continued to include updates from July 2002 on in issues of The HCFA/CMS Alumni News. Therefore the update in this issue is a complete one and can replace all prior updates. We plan to release the next complete Member Directory along with the next issue of the HCFA/CMS Alumni News. Since this is an update, you will **NOT** find yourself listed in it unless there has been a change in your membership information or you became a new member since the Member Directory was issued last summer.

We encourage members to keep us informed of changes so that we can in turn keep everyone up to date. E-mail addresses seem

to be particularly subject to change or elimination.

MEMBERSHIP SEARCH

As always, we acknowledge that there are many HCFA/CMS retirees that we have not been able to reach to tell them about the Alumni Association and invite them to join. We continue to ask for your assistance in spreading the message about us to them. If you know of any retiree that is not a member, please let them know about us and tell them how to contact us by telephone, snail mail or e-mail (all of that information can be found on page 2 of this issue). We will be very happy to send, either electronically or via snail mail, anyone the enrollment form and further information about membership. And Bill Engelhardt says you can always e-mail him personally at wlengelhardt@adelphia.net for faster response (as the office e-mail is only accessed weekly).

ALUMNI WEB SITE UPDATE

The HCFA/CMS Alumni web site, found at <http://www.cms.hhs.gov/about/alumni>, is constantly updated with retirement party listings, issues of this publication and issues of the CMS VOICE. The HCFA/CMS Alumni News and CMS VOICE are now being posted as Adobe Acrobat Reader (pdf) files. When you click on them, an Acrobat Reader file is automatically downloaded to your computer. This can then be opened with the Adobe Acrobat Reader program. If you do not have this program, it is available as a free download at <http://www.adobe.com/products/acrobat>

ALUMNI WEB SITE UPDATE
(Continued):

and is well worth having for many applications.

SSAEAA

We'd again like to remind members that we do have a link to the Social Security Administration Employee Activities Association (SSAEAA) on our web site. The actual URL for it is "<http://ssaeaa.org>" but you can just click on the link on our page. HCFA/CMS retirees are automatically members of the SSAEAA and are eligible to participate in discount purchases.

COLA COUNT – 2.1%

The Consumer Price Index for Urban Wage Earners and Clerical Workers, the CPI-W, increased 0.6 percent in March 2003 according to the Bureau of Labor and Statistics (BLS). Released on April 16th, the CPI-W for March rose to 180.3 compared to the 2002 third quarter base index of 176.6. For purposes of calculating the next COLA (cost-of-living adjustment) the index stands at 2.1 percent through six months of the count to the January 2004 federal retiree cost-of-living adjustment. Through five months of the count retirees had accumulated 1.5 percent, following an increase in February of 0.8 percent in the inflation index used to set the COLA. The accumulated amount already is above the 1.4 percent that retirees received in January 2003. The counting period for that COLA covered a period of low inflation, including

several months in which the inflation index dropped.

SOCIAL SECURITY & PENSION
REFORM

Government Pension Offset (GPO)

FEDweek reports that the Head of the House Social Security subcommittee, Rep. Clay Shaw, R-Fla., has reintroduced a Social Security reform plan (HR-75) that seeks to reform the "government pension offset," the provision that reduces Social Security spousal or survivor benefits for those also receiving an annuity from a retirement program that doesn't include Social Security, such as CSRS. Under current law, Social Security spousal or survivor benefits are reduced by \$2 for each \$3 received in an annuity from CSRS, which in many cases has the effect of totally eliminating the Social Security benefit. Shaw's measure would reduce that offset to \$1 for each \$3. He offered a similar measure in the previous Congress.

Earnings Test

Shaw's measure also would repeal a Social Security provision primarily of interest to those retiring under the FERS retirement system: the earnings test, a reduction in an individual's Social Security payments or special retirement supplement (paid to FERS retirees in certain situations) made when he or she continues to work after benefits begin and earns over an allowable amount (\$11,520 currently). For every \$2 earned over this amount, the individual currently must give up \$1 in benefits if age 62-64. In the year an individual reaches "full" Social Security retirement age (currently 65 and 2

SOCIAL SECURITY & PENSION REFORM (Continued):

months, phasing up to 67 over the next two decades) individuals can earn up to a limit (\$30,720 currently) in the months before they reach that age with no reduction in benefits but for every \$3 they earn over that limit in that time, \$1 is withheld from benefits. There is no earnings test for those above "full" retirement age; a prior test for those aged 65-69 was repealed in 2000.

Another GPO Reform Proposal

Sen. Barbara Mikulski, D-Md., has reintroduced in Congress a bill (S-363) to alter the government pension offset by making the \$2 for each \$3 reduction apply only to amounts in combined benefits above \$1200 a month. Similar legislation has been introduced for many years and in the last two Congresses attracted a majority of House members as cosponsors. However, the proposal never has been formally considered beyond some attention at House subcommittee hearings.

GPO & WEP Repeal Measures

Two other measures introduced in Congress would totally repeal both the government pension offset and another provision of Social Security law also primarily applying to CSRS annuitants, the windfall elimination provision. The WEP reduces the benefits of an individual who had fewer than 30 years of "substantial" Social Security earnings (currently \$16,125). The primary effect is on CSRS annuitants who earned enough Social Security credits to qualify for a benefit under that system but often at low salary rates, such as before starting their federal career, moonlighting while a CSRS-

covered employee or taking a part-time job after retirement from the government. The maximum reduction, for those with 20 or fewer years of "substantial" Social Security service, is about \$300 a month. Rep. Howard McKeon, R-Calif. (HR-594) and Sen. Dianne Feinstein, D-Calif. (S-349) offered the repeal bills.

RETIREE PREMIUM CONVERSION

Bills have been reintroduced in the House and Senate (HR-1231 and S-623) to allow federal retirees to participate in the "premium conversion" arrangement in which active federal employees may pay Federal Employees Health Benefits premiums with pre-tax money. While active employees have been eligible for the tax break, worth more than \$400 a year on average, since late 2000, retirees are excluded because of a provision in the tax code. Similar bills to include retirees have been offered since then but have not come to votes, mainly because of concern that they would set a precedent for private sector retirees to get a similar tax break, at a large cost in lost tax revenues. Those budgetary considerations remain, although with the prime House sponsor, Rep. Thomas Davis, R-Va., now heading the House Government Reform Committee, the idea is expected to draw more attention in the current Congress. The main Senate sponsor is Sen. John Warner, R-Va.

FEHB PREMIUM HIKES IN LINE

The rise in Federal Employees Health Benefits program premiums in recent years has been in line with increases in other large employer-sponsored health insurance plans,

FEHB PREMIUM HIKES IN LINE
(Continued):

the General Accounting Office has found. FEDweek reports the GAO said that in comparison to an average of large employers "those with at least 5,000 employees" and with the largest state employee health insurance program "the CalPERS system for employees of California" FEHB premiums increased at a lower rate in the first half of the 1990s and have increased at a slightly higher rate since then. GAO's report (GAO-03-236) also noted that FEHB premium increases "were partially offset by some plans reducing benefits" mostly increased enrollee cost sharing "and some enrollees switching to plans with lower premiums."

GAO laid most of the blame for FEHB premium increases of recent years on factors often cited for driving up costs in the program, primarily increasing expenditures for prescription drugs and hospital outpatient care, which together accounted for more than 70 percent of the increase. "Increasing plan payments per drug dispensed accounted for most of the increase in expenditures for drugs, while increasing utilization accounted for the increase in hospital outpatient care expenditures," it said. Physician visits and hospital inpatient care accounted for most of the rest of the increases. Among the three largest plans, per-enrollee claims expenditures increased by 12.6 percent from 1998 to 2000, GAO said, adding that "increased utilization was in part associated with FEHB's aging enrollee population," which now averages 62.1 years old. GAO also noted that plans have been required to cover certain new benefits in recent years.

BENEFIT CUTTING THREAT EASED

During the House-Senate conference on the budget resolution, members dropped House language that would have specified cuts from programs under the control of the House Government Reform and Senate Governmental Affairs Committees. That cut, "it would have been \$1.1 billion in one year and \$40 billion over 10 years," could have fallen at least in part on the two big-ticket items under those committees, jurisdiction, the federal retirement and health insurance programs, although leaders said savings from procurement reform and agency reorganization would have been their first target. Instead, the conferees ordered committees to report ways to reduce waste, fraud and abuse in the programs they oversee. That could relieve the threat to benefits, although much may depend on the definition of "waste." To some budget watchdogs, features such as full inflation adjustments on annuities are wasteful, while to employees and retirees they are a vital part of a promised package of benefits.

GENERIC DRUG PRICING
Submitted by Blanche Duffy

I don't take any prescription drugs so I don't know whether this information is correct or not. But I thought it was worth passing along because this report regarding Costco seems worth checking out. This is NOT a paid commercial plug for Costco, but if they have one, a good deal it is a good deal. A friend sent the following narrative to me.

Last July Steve Wilson, an investigative reporter for channel 7 News in Detroit, did a story on generic drug price gouging by pharmacies. He found in his investigation,

GENERIC DRUG PRICING

(Continued):

that some of these generic drugs were marked up as much as 3,000% or more. Yes, that's not a typo..... three thousand percent! Mr. Wilson did a thorough research, and checked out all of the major drugstore chains, discount chains, independent pharmacies, and even checked on some Canadian pharmacies.

So often, we blame the drug companies for the high cost of drugs, and rightfully so. But in this case, the fault clearly lies with the pharmacies themselves. For example, if you had to buy a prescription drug, and bought the name brand, you might pay \$100 for 100 pills. The pharmacist might tell you that if you get the generic equivalent, they would only cost \$80, making you think you are "saving" \$20. What the pharmacist is not telling you is that those 100 generic pills may have only cost him \$10!

At the end of the report, one of the anchors asked Mr. Wilson whether or not there were any pharmacies that did not adhere to this practice, and he said that Costco consistently charged little over their cost for the generic drugs. They gave the link to Costco, which I will include here, so that you can go and check prices for yourself.

<http://www.costco.com>

I went to the Costco site, where you can look up any drug, and get it's online price. It says that the in-store prices are consistent with the online prices. I was amazed at the Costco pricing and appalled at other pricing. Just to give you one example from a friend's experience, she had to use the drug, Compazine, which helps prevent nausea in

chemotherapy patients. She used the generic equivalent, which cost \$54.99 for 60 pills at CVS. She checked the price at Costco, and she could have bought 100 pills for \$19.89. For 145 of her pain pills she paid \$72.57. My friend could have got 150 at Costco for \$28.08.

I should mention that, although Costco is a "membership" type store, you do NOT have to be a member to buy prescriptions there, as it is a federally regulated substance. You just tell them at the door that you wish to use the pharmacy, and they will let you in.

SENIOR MANAGEMENT ANNOUNCEMENTS

Ruben Jose King-Shaw, Jr., CMS Deputy Administrator and Chief Operating Officer, has announced that he is leaving the agency. His notice to all staff read:

I write this only after many weeks of prayer, discussions and reflection. Despite my every effort to find an alternative road, I have come to understand that in order to meet my responsibilities to my family, to fulfill my duties as leader of the Bush Administration's health care tax credit strategies, and to serve the President in other ways, it is necessary and appropriate that I relinquish my position as Deputy Administrator and Chief Operating Officer of CMS.

My time at CMS has been the most rewarding and meaningful of my career to date. Without question, the people here at CMS are among the most talented, dedicated and compassionate I will ever know. To be a part CMS in Baltimore, Washington, San Juan, Miami and every one of our Regional

SENIOR MANAGEMENT
ANNOUNCEMENTS (Continued):

Offices is an honor that I will carry with me always.

I am very proud of our many accomplishments during our time together. We have taken the Agency to new heights of openness, responsiveness, performance and creativity. There are many challenges that lie ahead. Yet with courage, resolve, focus and strong leadership, you will meet every challenge.

I wish to thank Tom Scully for his boundless energy and the bond of friendship that enabled us, for too short a time, to be a Dynamic Duo. I wish all the best to Leslie and the rest of the team who will carry the torch forward. Should God's providence allow, perhaps I will return someday when again I am able to serve along side each of you.

I urge that you remember always that CMS has a great mission. Never forget that each and every one of you are heroes to millions people you will never know -- and the hope to many you will never see. Keep that hope alive.

In parting, I have only one simple request. I know that many of you have seen leaders come and go. Yet I hope that you remember me as one of the good ones. I hope that today, tomorrow and years from now that you recall that there once was a guy named Ruben Jose King-Shaw, Jr. who did more than work at CMS. He believed in CMS.

Onward and Upward! (Arriba y Pa'lante)

Ruben Jose King-Shaw, Jr.

Leslie Norwalk, Counselor to CMS, has been appointed Acting Deputy Administrator. She had already picked up many of Ruben Jose King-Shaw, JR's tasks in the last few months, as he spent 80% of his time at Treasury on a tax credit project. She was effectively acting as the Deputy Administrator in his absence--and this simply formalizes that role.

Richard Chambers, Deputy Director of CMSO, has left CMS to head the Orange County, CA Medicaid program. He had recently also gone to San Francisco to fill in as acting RA for a few months.

Dr Conan Davis has been appointed Chief Dental Officer in CMS as part of a continuing effort to bring more doctors into the organization. "Previously the massive Medicaid program, which serves lots of kids dental needs, had no dentist," said Administrator Scully in explaining this new position.

Michelle Snyder, the Director of the Office of Financial Management (OFM) in Baltimore, has decided to accept a new post as the Director of the Office of Special Projects at HRSA.

Tim Hill, currently Deputy Director of OFM, will assume the role of the Acting Director of OFM.

Jackie Garner has been appointed as the new Regional Administrator for the Chicago Regional Office. Jackie brings to this position over 20 years of experience in health and human services. She previously served as the State Medicaid Director for the Illinois Department of Public Aid.

**SENIOR MANAGEMENT
ANNOUNCEMENTS (Continued):**

SES Selections

The Department of Health & Human Services has selected five CMS managers to participate in the Senior Executive Service Candidate Development Program (SES CDP). They are:

-- **Karen Jackson**, Deputy Director, Medicare Contractor Management Group, CMM

-- **Gerry Nicholson**, Director, Provider Communications Group, CMM

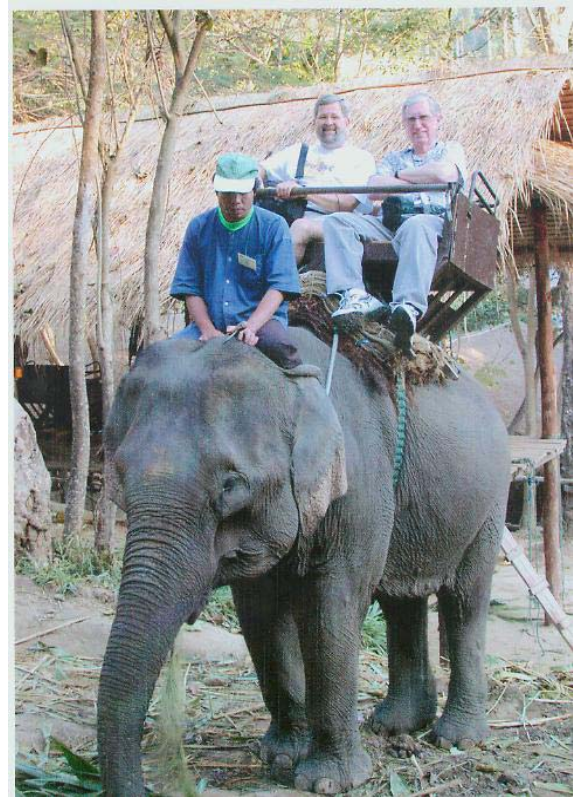
-- **Chet Robinson**, Director, Division of Community and Post Acute Care, Chronic Care Policy Group, CMM

-- **Debbie Schoenemann**, Director, Division of Employee Benefits and Services, Human Resources Management Group, OICS

-- **Brenda Tranchida**, Deputy Director, Program Integrity Group, OFM

These managers were selected by a HHS panel through a highly competitive review process. The SES CDP is a six-month program that provides a series of intensive developmental experiences to prepare candidates for executive responsibilities. Once the program is completed, the candidates will have the opportunity to be non-competitively selected for SES positions.

**BOB BATH – INVETERATE
TRAVELER**



Our own Bob Bath, retired from the San Francisco Regional Office, from which he had managed the outstation office in Honolulu, is proof positive that we retirees are active and on the go. He is always off somewhere, often touring Austria and Germany (someone has to make sure those beer gardens are pouring a good brew, ha). In the photo above, Bob (on the left) is seen with George Lewis, a former PHS civilian employee, riding an elephant in Thailand. In his own words the following report was submitted by Bob, "Foreign" Correspondent.

Well, as you can see, I really did ride that buggah!...for a whole hour, too! I don't know who was more worn out...me or the elephant! But it was quite a kick! I'm ready to go back. I was in Thailand at the moment

**BOB BATH – INVETERATE
TRAVELER (Continued):**

the photo was taken but had spent the first five days of my journey in Siem Reap, Cambodia, touring the ancient ruins of Angkor. They are truly fascinating especially considering that they were constructed in the 9th, 10th and 11th centuries and weathered all the upheavals in that area over the years. Remember the Khmer Rouge and Pol Pot? In addition to the “antiquity” I had the opportunity to meet some really nice Cambodian people. In fact, I've been keeping in contact with them regularly....isn't e-mail wonderful? Then it was off to Thailand where I spent a few days in Bangkok taking in all the standard sights there. Bangkok is a fascinating city.... especially if you like crowds, congestion, fumes, noise and all the other sensory things that make Asian cities so unique! After that experience it was time for some more bucolic endeavors and we headed north, stopping at the ancient capitals of Ayutthaya, Phitsanulok and Sukhothai, and ending up at the Golden Triangle of opium fame where Thailand, Laos and Myanmar (Burma) all come together along the Mekong River. In fact I actually got to go into Laos and Myanmar for a short few hours each. By the way, on the trip north I actually ate some roasted bugs....yep, bugs. They sell these in all the street markets throughout the country and my curiosity got the better of me. Hell, I figured if people eat them they surely can't kill you. Turned out they were not crispy and crunchy as you might expect...had sort of a musty taste. Spent some time in the Northern Thailand cities of Chiang Rai and Chiang Mai and even took a boat trip up the Mae Kok River to visit the Northern Hill Tribes. In Chiang Mai there are several elephant camps and

the largest, the Maesa Elephant Camp, is where I got to spend that hour atop one of those pachyderms.

Just before heading back to Hawaii I spent another three days in Bangkok and took a bicycle tour of the back streets and alleys of the city. The tour also took us over to Phra Pradaeng, a small island in the Chao Praya River that bisects Bangkok. This island is just a few kilometers downriver from the bustling heart of the city and is called the "green lungs of Bangkok" because it is a lush, tropical island with restrictions on development. Much of the island is thick jungle or swamp and you get around on elevated concrete walkways that are no more than 4 1/2 feet wide. These are great to walk on but try navigating a bike over these things that have you 3 to 8 feet above the ground. The total bike trip, including the boat ride over to the island, was five hours and we covered 27 kms.... that's over 16 miles. What an adventure! But I wouldn't recommend it because traversing those elevated walkways is quite dangerous and only after we got back did we learn that an average year sees about 3 deaths and numerous injuries as riders take headers off these things. All in all it was great fun and I'm ready to go again.

As an added note, Bob had a photo from this trip published in *The Honolulu Advertiser's* Travel Section. He found this little “pizza joint” named “Hawaii Restaurant Room, No Problem Pizza,” in Siem Reap, Cambodia, a town near the Angkor Wat temple ruins. “I asked the owner if he was from Hawaii, and not only was he not from Hawaii, but he'd never been here,” Bath said. “He just liked the name.... and the pizza was pretty good!”

HELP PARENTS ON THE HOUSE

FEDweek presents this familiar scenario: parents (or one parent) want to stay in their house, where they're comfortable, but they also need to cash in their home equity for a comfortable retirement lifestyle.

Children can help by buying their parents' home, then renting it back to them. Both parties stand to gain, thanks to the tax code. Chances are, the parents aren't getting many tax advantages from home ownership:

After living in the house for so many years the mortgage may be paid off, or nearly so. With a low mortgage or no mortgage, they get little or no deductions for mortgage interest.

Even if they pay mortgage interest, the deduction may not be worth much, if their retirement income puts them into a low tax bracket. The same goes for their property tax deductions.

Many seniors take a standard deduction rather than itemize. If parents are in this category, they're getting no tax benefit from home ownership.

On the other hand, if children buy their parents' house and rent it back to them, they'll probably be in a position to profit from the tax benefits of owning investment property. Meanwhile, the parents stay in their familiar house, with cash in their pockets.

In most cases, parents won't owe any tax on the sale. As long as they've lived in the house at least two years, they can avoid tax on \$500,000 worth of gain (\$250,00 for single taxpayers). With tax-free cash from

the sale, parents will likely be able to pay a "fair market rent" to keep living in the house. That's a requirement in order for tax advantages to be maximized.

In any case, children will be allowed deductions for property taxes and mortgage interest, the same as if they used the property as a vacation home. However, if the rent is fair and the house is considered rental property, they also can take deductions for operating expenses such as utilities, maintenance, insurance, repairs, supplies, and so on.

Travel expenses also may be deductible: if children go to visit their parents, some or all of the expenses can be written off as investment property monitoring. In addition, residential properties placed in service can be depreciated over 27.5 years.

These deductions can offset the rental income children receive from their parents so most or all of this income can be tax-sheltered. If the expenses exceed the rental income, the loss may be deductible, in whole or in part, if total income is under \$150,000.

TIME GETS BETTER WITH AGE

Submitted by Rusty Wills

I learned that I like my teacher because she cries when we sing "Silent Night".

Age 5

I learned that our dog doesn't want to eat my broccoli either.

Age 7

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I learned that when I wave to people in the country, they stop what they are doing and wave back.

Age 9

TIME GETS BETTER WITH AGE
(Continued):

I learned that just when I get my room the way I like it, Mom makes me clean it up again.

Age 12

I learned that if you want to cheer yourself up, you should try cheering someone else up.

Age 14

I learned that although it's hard to admit it, I'm secretly glad my parents are strict with me.

Age 15

I learned that silent company is often more healing than words of advice.

Age 24

I learned that brushing my child's hair is one of life's great pleasures.

Age 26

I learned that wherever I go, the world's worst drivers have followed me there.

Age 29

I learned that if someone says something unkind about me, I must live so that no one will believe it.

Age 30

I learned that there are people who love you dearly, but just don't know how to show it.

Age 42

I learned that you can make someone's day by simply sending them a little note.

Age 44

I learned that the greater a person's sense of guilt, the greater his or her need to cast blame on others.

Age 46

I learned that children and grandparents are natural allies.

Age 47

I learned that no matter what happens, or how bad it seems today, life does go on, and it will be better tomorrow.

Age 48

I learned that singing "Amazing Grace" can lift my spirits for hours.

Age 49

I learned that motel mattresses are better on the side away from the phone.

Age 50

I learned that you can tell a lot about a man by the way he handles these three things: a rainy day, lost luggage, and tangled Christmas tree lights.

Age 51

I learned that keeping a vegetable garden is worth a medicine cabinet full of pills.

Age 52

I learned that regardless of your relationship with your parents, you miss them terribly after they die.

Age 53

I learned that making a living is not the same thing as making a life.

Age 58

Page 13

I learned that if you want to do something positive for your children, work to improve your marriage.

Age 61

I learned that life sometimes gives you a second chance.

Age 62

I learned that you shouldn't go through life with a catchers mitt on both hands. You need to be able to throw something back.

Age 64

I learned that if you pursue happiness, it will elude you. But if you focus on your family, the needs of others, your work, meeting new people, and doing the very best you can, happiness will find you.

Age 65

TIME GETS BETTER WITH AGE **(Continued):**

I learned that whenever I decide something with kindness, I usually make the right decision.

Age 66

I learned that everyone can use a prayer.

Age 72

I learned that even when I have pains, I don't have to be one.

Age 82

I learned that every day you should reach out and touch someone. People love that human touch-holding hands, a warm hug, or just a friendly pat on the back.

Age 90

I learned that I still have a lot to learn.

Age 92

I learned that you should pass this on to someone you care about. Sometimes they just need a little something to make them smile.

FRANCES J. CONTRERAS BEQUEST

In the Summer 2001 issue of this publication we reported that Frances J. Contreras, a HCFA Region IX (San Francisco) employee in the Medicaid Program, died on April 26, 2001. Frances manifested a significant and positive influence within the Latino community and she never forgot her legacy of sharing. A recent issue of "The Science of Caring," published by the University of California at San Francisco School of Nursing and Medicine, contained an article entitled "A Legacy of Caring" by Clint Marsh. It read:

School of Nursing alumna Frances J. Contreras, RN, BS, was known as an

extremely thoughtful and giving person throughout her life, as well as a groundbreaking leader not only in the School of Nursing but also in the School of Medicine. As such, her final gift of land and a life insurance policy to UCSF is perfectly in keeping with Contreras' unselfish nature and commitment to students at UCSF.

Born in 1937, Contreras grew up in rural Kern County. Her parents sold potatoes to the military in the '40s, earning enough that they were able to start the Contreras Ranch, a large farm that became a source of eggs for neighbors and local stores.

Contreras moved to San Francisco as a young woman and graduated from the School of Nursing in 1966. She visited her family at the farm often, always returning with gifts of fruits and vegetables for her friends, co-workers, and children in the apartment complex where she lived.

“Frances was a generous person, with a very big heart and spirit,” says Sara Purcell, a longtime friend. “She would never visit a house without bringing lots of food and gifts for her hosts.

In the 1970s, Contreras served as Director of the Urban Health Project, a UCSF program that eventually evolved into the outpatient clinic and Family Health Center at San Francisco General Hospital (SFGH).

“At that point, everyone who came to SFGH went to the trauma center or the emergency room,” says David Sanchez, Jr., professor of family and community medicine and chair of the UCSF policy board on student outreach, recruitment and retention. “There was no outpatient clinic, there was no community health network, and we didn’t

FRANCES J. CONTRERAS BEQUEST (Continued):

have any community health clinics. All these things were part of Frances’ collaboration and leadership over the years, to develop a comprehensive model including access to care both at General and within the communities.”

Contreras was the first nurse to serve on the School of Medicine’s admissions committee, championing students who came from rural backgrounds and may have been

overlooked otherwise. Friends recall that the first applicant Contreras interviewed was the young Richard Carmona, the medical student who would go on to be named Surgeon General of the United States in July 2002.

“Frances was an exceptional innovator and bridge builder and the one who really made her mark not only in the San Francisco Bay Area but also the entire state of California,” Sanchez says. “She opened the doors and fought the battles so our diverse communities would have access to quality care, and her gift makes sure her dream continues.”

Contreras maintained her nursing certificate throughout her life, but was not defined solely by her career, which included 20 years at the Health Care Financing Administration. She was president and secretary of the Mexican American Political Association in San Francisco and took full advantage of the city’s cultural life, attending opera and symphony performances as often as she could.

When her mother passed away in 1989, Contreras inherited a portion of the family farm. She passed on half of this inheritance as part of her bequest to UCSF upon her death from liver cancer in April 2001. Her bequest will support nursing scholarships, diabetes research and the UCSF Diabetes Teaching Center.

“She loved UCSF,” says Purcell, “and her life, especially after she retired revolved around UC. I think she thought of this as her legacy.”

OBITUARIES

ALICE MARIE HEIFERMAN

By William L. Engelhardt, HCFA Retiree

CMS Region II employee Alice Marie Heiferman passed away on May 9, 2003 in New York City. As Joel Truman, her current Branch Chief, so aptly put it, "Alice was a person who showed great courage and persistence in the face of multiple disabilities." She worked in the Medicaid Division of the New York Regional Office for many years. Much of that time was spent in the Medicaid Quality Control Branch, where I was Branch Chief until my retirement in 1994. She currently worked in the Division of Medicaid and Children's Health.

Alice was Irish through and through and justifiably proud as could be about it. And she was such an ardent fan of Navy football that one cannot think of an Army-Navy Game without thinking about Alice. She will certainly be missed.

PEGGY L. PARKS

By Tom Scully, CMS Administrator

I am saddened to announce that a dear CMS friend and colleague, Peggy Parks, Ph.D., died unexpectedly from cancer on

OBITUARIES (Continued):

April 25, 2003 at Johns Hopkins Hospital. Peggy worked in CBC, in the Division of Post Acute and Ambulatory Care in the Quality Measurement and Health Assessment Group, since February 2, 1998.

Previously, she had a distinguished career at the University of Maryland School of Nursing.

Peggy most recently served as the Quality Improvement Organization (QIO) government task leader for the Nursing Home Quality Initiative (NHQI). She headed up one of the four main prongs of this initiative, and helped to lead the NHQI team as it 'put the pedal to the metal' to achieve a very successful launch and program. It was Peggy's personal experiences both with her own cancer and with her mother's life in a Missouri nursing home that fueled her passion for publicly reported measures of quality, and culture change and quality improvement activities to assist nursing homes to improve their care. To her coworkers, she was a friend, teacher, source of inspiration and mentor, and they will miss her wisdom and joy for life.

JOANNE L. WALKER

By Robert G. Bath, HCFA Retiree

Former HCFA Region IX employee Joanne L. Walker passed away on March 13, 2003 in Maine. Joanne was a mainstay of the Medicaid Division in the San Francisco Regional Office for many years. She served for a long time as the Medicaid State Representative for the State of California and for a shorter time for the State of Hawaii and the Pacific Territories. Joanne was also

a member of the HCFA/CMS Alumni Association in her retirement.

IN MEMORIAM

**The Alumni Association respectfully acknowledges
the passing of the following
Alumni/Employees/Spouses and expresses its
sympathy to family members:**

BERNARD ENIS*

ALICE MARIE HEIFERMAN**

PEGGY L. PARKS***

JOANNE WALKER****

*HCFA retiree, Central Office – Contractor Operations

**CMS employee, New York Regional Office

***CMS employee, Central Office

**** HCFA Retiree, San Francisco Regional Office

**If you are aware of any other deaths of Alumni please notify the editorial staff
May 2003**